

Receipt



KIX0137-PCT

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Hiroaki ONISHI, et al.

Serial No. 09/786,680

Art Unit: 2622

Filed: March 8, 2001

Examiner: Unknown

For: IMAGE READING APPARATUS

Assistant Commissioner for Patents
U.S. Patent and Trademark Office
Washington, D.C. 20231

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REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Sir:

Applicants are in receipt of the Official Filing Receipt in the above-identified application.

Upon review of the Official Filing Receipt, applicants note that the title of the invention is mentioned from the corresponding PCT application and not from the Declaration. Specifically, the title of the invention should be --IMAGE READING APPARATUS -- instead of "IMAGE READER".

A corrected filing receipt is warranted to maintain an accurate record in the office file of the above-identified application especially since it involves the title of the invention.

No fee is believed to be required since the incorrect filing receipt was due to an error by the Office. If, however, a fee is required, please charge it to applicant's


Serial No. 09/786,680

Art Unit: 2622

Attorney's Docket No. KIX0137-PCT

representative's Deposit Account No. 50-1390.

Respectfully submitted,

By:  41,434
Michael D. Bednarek
Registration No. 32,329

SHAW PITTMAN

1650 Tysons Boulevard

McLean, VA 22102-4859

Telephone: (703) 770-7606

Date: **April 27, 2001**



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/786,680	03/08/2001	2622	1020	KIX0137-PCT	10	20	5

Michael D Bednarek
Shaw Pittman
1650 Tysons Boulevard
McLean, VA 22102-4859

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CONFIRMATION NO. 3562

FILING RECEIPT



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Date Mailed: 04/18/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Hiroaki Onishi, Kyoto, JAPAN;
Tokihiko Kishimoto, Kyoto, JAPAN;
Hisayoshi Fujimoto, Kyoto, JAPAN;

Domestic Priority data as claimed by applicant

THIS APPLICATION IS A 371 OF PCT/JP99/04845 09/06/1999

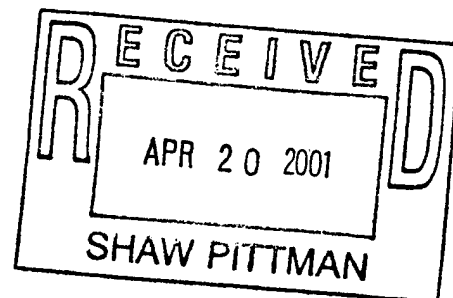
Foreign Applications

JAPAN 10-255602 09/09/1998
JAPAN 10-282640 10/05/1998
JAPAN 10-282664 10/05/1998
JAPAN 10-295004 10/16/1998

Projected Publication Date: N/A

Non-Publication Request: No

Early Publication Request: No



Title

Reading Apparatus--

--Image reader

Preliminary Class

358

Data entry by : NGUYEN, SON

Team : OIPE

Date: 04/18/2001



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Bib Data Sheet

CONFIRMATION NO. 3562

SERIAL NUMBER 09/786,680	FILING DATE 03/08/2001 RULE	CLASS 358	GROUP ART UNIT 2622	ATTORNEY DOCKET NO. KIX0137-PCT	
APPLICANTS Hiroaki Onishi, Kyoto, JAPAN; Tokihiko Kishimoto, Kyoto, JAPAN; Hisayoshi Fujimoto, Kyoto, JAPAN;					
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/JP99/04845 09/06/1999 <i>YES. GL.</i>					
** FOREIGN APPLICATIONS ***** JAPAN 10-255602 09/09/1998 JAPAN 10-282640 10/05/1998 JAPAN 10-282664 10/05/1998 JAPAN 10-295004 10/16/1998 <i>YES.</i>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY JAPAN	SHEETS DRAWING 10	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 5
Verified and Acknowledged Examiner's Signature _____ Initials _____					
ADDRESS Michael D Bednarek Shaw Pittman 1650 Tysons Boulevard McLean, VA 22102-4859					
TITLE Image reading apparatus					
FILING FEE RECEIVED 1020	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		